



Anticipatory Care Planning in Care Homes – talking with relatives/ friends

Anticipatory care planning is about thinking and planning ahead so that we can give each person the best possible care. If a person's health changes, it is better if we have a good plan for them.

READY Can we talk about why planning ahead helps people get better care?

Making a plan helps us think about care for people who live in a care home and what is important to them. You may have talked with your relative or friend about this before.

It is a good idea to talk about what might happen if they get unwell. This could be from a health problem or illness they have already. It might be a new illness. Some residents may get unwell with coronavirus or another infection. We can make plans just in case.

EXPECT It would help to hear what you know already, and think might happen.

People have different things they want to talk about. Please ask us about anything you want to know or are worried about. We can make a plan with you now, if you are ready.

DIAGNOSIS There are things we know, and things we are not sure about.

People who live in care homes are often in poorer health and need help with day to day living. We are doing our best to help your relative/friend to stay well, but it is possible they may get unwell at some point. Some treatments may not work for them, or they might not want them. That's why it is important for us to talk about making a future care plan for them.

MATTERS Knowing what's important to your relative/friend, helps us care for them.

We put this information into their care plan so we know about how they'd like to be cared for.

ACTION Let's talk about what we can do to care for them, and things that will not help.

Let's start with their health problems and make plans for what might happen. There are also some situations it is good to plan ahead for like a sudden illness or an infection.

Many people feel that staying in their familiar care home to be looked after is the best place when they are very ill and may be dying. Being comfortable is what matters to them. We have medicines in the care home to help us manage any symptoms or discomfort, if we need them.

Hospital treatment may be better in a few conditions, like a hip fracture. Going to hospital has risks and benefits. Can we talk about that, and what would be the best place to care for them? Antibiotic tablets or syrup, other medicines, and oxygen can be given in the home, if needed.

Cardiopulmonary resuscitation (CPR) is a medical treatment that does not work when a person is in poor health or dying, but any other treatments that can help are given.

- a) Your relative already has a decision recorded about CPR not working/being used for them.
- b) There is no CPR decision recorded so the GP/nurse will review this and discuss it with you.

PLAN Let's make a future Care Plan for your relative/friend.

We have the plan in the home in case we need it. The plan also goes into their GP record and a secure record used by professionals if people need urgent care called a Key Information Summary (KIS). The plan can be changed at any time.

There are some situations we can think about and discuss together. If you have any questions please ask. You can talk to care home staff, and the staff from the GP practice too.